FORM XVII
[See Rule 78(1) (a)(i)]

Name & Address of Contractor

Name & Address of establishment: M/s Ujjwal Enterprises, 611, Joshi Road, Karol Bagh, New Delhi-110005

: M/s Ujjwal Enterprises, 611, Joshi Road, Karol Bagh, New Delhi-110005 Nature & Location of Work

: Sn. Photocopy / Delhi

: BLK Hospital Nature & Address of Principal Employer

Pusa Road, New Delhi-110005

Wage Period: April-21

under which contract is carried on															Pusa Road, New Delm-110005														
	S.No. in the register of] workmen employed by	Name of Employee	Father's Name	er	п	s		Wage I	Rate			Off Days Holidays	s	rk	Piece Rate	Basic	HRA	Spl Allow	Leave Salary	Amount of Wages		Deductions			g g	=	ent	Signature / thumb	,
S. No.				ESI No	Designation	onthly I	Basic	HRA	Spl Allow	Total	Off Days		Working Day	Units of Wo Done						Arrears	Total	ESIC	EPF	Adv	Total Deducti	Net Amour Paid	Place of Payme	impression of workman	Bank Account Cheque No.
1	1468		MOHAMMAD RAJAK	1113884230	TAILOR	26	13,160	5,637	1	18,797	1	-	26	26	=	13,160	5,637	-	658	-	19,455	146	1,579	-	1,725	17,730	Delhi	Bank Transfer	0117053000060524 SIBL0000117
2	1839	SANJAY	DHARMVIR	1114365674	PHOTOCOPY	26	13,160	5,637	-	18,797	-	-	25	25	-	12,654	5,420	-	633	-	18,707	141	1,518	-	1,659	17,048	Delhi	Bank Transfer	06860100010807 BARB0PUSARO
T	0	T A L	1	1										51	-	25,814	11,057	-	1,291		38,162	287	3,097	-	3,384	34,778			
2														TRUE															